

Readiness Support Group Information Survey

(For use of this form, see USMEPCOM Reg 608-1)

AUTHORITY: Title 10, USC, Section 3012, PRINCIPLE PURPOSES(S): To assist US Military Entrance Processing Command in the mission of providing care and assistance to service members. Department of the Army civilians, and family members. ROUTINE USES: (1) To identify specific problems and service needs of personnel and their families. (2) To gather data that will assist in the development of appropriate programs and services. (3) To serve as a record of services provided.

USMEPCOM Member's Name: _____

Directorate: _____ Title: _____ Work Ext: _____

Spouse's Name: _____

Home Address: _____ Home Phone: _____
City: _____ State: _____ Zip Code: _____

E-mail Address at home: _____

Spouse's Place of Employment: _____

Spouse's Work Phone: _____ Cell Alternate Phone: _____

Children:

Name	Age	Date of Birth	School

(If you are expecting a child, please let us know! We will have a small gift for the baby, and would like to update our roster)

Primary Language in Home: _____ English: _____ Other (Please list: _____)

If English is not primary language, are translation services needed? _____ Yes _____ No

Emergency Contact (Other than Spouse):

Name: _____ Relationship: _____

Primary Phone: _____ Alternate Phone: _____

In case of emergency, who would contact pick your children up from school?

Name: _____ Phone: _____

In case of emergency, do you have pets that need care? _____ Yes _____ No (Please note if someone other than above needs to be contacted to care for pets.)

Do you or any family member require extra assistance in any area? Please explain: _____

Would you or your spouse be interested in helping RSG with any of the following?

Please check all that apply:

_____ Plan Events	_____ Telephone Calls	_____ RSG Activities
_____ Fundraisings	_____ Welcome Committee	_____ New Baby
_____ Meals/Baking	_____ Lunch and Learn	_____ Newsletter
_____ Other/(Specify) _____		

I give my permission for my phone number to be published in the RSG Contact Roster: _____ Yes _____ No

Your Signature: _____ Date: _____